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CHAIR



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## MARYLAND HEALTH CARE COMMISSION

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**Thursday, September 17, 2015**

### **Minutes**

Chairman Tanio called the meeting to order at 1:05 p.m.

Commissioners present: Carr, Fronstin, Metz, Moffit, Montgomery, Peralta, Pollak, Schneider, Stollenwerk, Thomas, and Weinstein. Commissioner Kan participated via telephone.

### **ITEM 1.**

#### **Approval of the Minutes**

Commissioner Kan made a motion to approve the minutes of the July 16, 2015 meeting of the Commission, which was seconded by Commissioner Peralta and unanimously approved.

### **ITEM 2.**

#### **Update of Activities**

Ben Steffen, Executive Director, noted that Suellen Wideman, AAG led the Commission staff's contribution to an *Amicus Curiae* brief in the Liberty Mutual v. Vermont case with regard to obtaining data from ERISA plans. Mr. Steffen also contributed to another *Amicus Curiae* brief filed by the National Association of Health Data Organizations (NAHDO). Mr. Steffen noted that staff participated in development of a comment letter from the Millbank Memorial Fund to the Centers for Medicare and Medicaid (CMS) with regard to modification of the CMS Multi-Payer PCMH Program.

Mr. Steffen announced that Dr. David Sharp, Director of the Center for Health Information Technology & Innovative Care Delivery, has been appointed to represent the Commission on the CRISP Integrated Care Network (ICN) Steering Committee, which is supporting development of technical tools for the hospital payment model.

Mr. Steffen also noted that the Maryland Health Benefit Exchange's (MHBE's) Network Adequacy Workgroup made several recommendations in areas of data collection; provider directories; and quantitative measures to determine network adequacy. It has been proposed that MHCC would work collaboratively MHBE to make claims data available to determine network adequacy.

Paul Parker, Director of the Center for Health Care Facilities Planning and Development, introduced the Center's new methodologist, Hoi Su: and Angela Clark, the Center's new Certificate of Need Project Review Analyst.

David Sharp introduced Matthew McBride, the Center's new Chief of Health IT and Angela Evatt, Chief of Health Information Exchange introduced Lynn Albizio, Health Policy Analyst – Advanced, for the Center's Health Information Exchange division.

### **ITEM 3.**

#### **ACTION: Exemption from Certificate of Need Review: Merger of HomeCare Maryland, LLC and Carroll Home Care**

HomeCare Maryland, a home health agency that is 51% owned by Lifebridge Health , submitted a request for an exemption from Certificate of Need review to consolidate its operations with Carroll Home Care, currently a hospital-based home health agency of Carroll Hospital Center, which in turn is a subsidiary of Lifebridge Health. HomeCare Maryland will be the surviving home health agency. Kevin McDonald, Chief, Certificate of Need, presented the staff's recommendation for approval of the exemption. Commissioner Moffit made a motion that the Commission approve the exemption, which was seconded by Commissioner Pollak. Following discussion regarding a review of results of HomeCare Maryland's quality measures following consolidation of its operations, the Exemption was unanimously approved.

**ACTION: Exemption from Certificate of Need Review: Merger of HomeCare Maryland, LLC and Carroll Home Care is hereby APPROVED.**

### **ITEM 4.**

#### **ACTION: Certificate of Need: Lorien-Howard, Inc. d/b/a Encore at Turf Valley (Docket No. 15-13-2365)**

Lorien –Howard, Inc. applied for a Certificate of Need to add 28 comprehensive care facility beds as part of a project that will include new construction and renovation. Kevin McDonald presented the staff's recommendation for approval of the Certificate of Need. Commissioner Moffit made a motion that the Commission approve the Certificate of Need, which was seconded by Commissioner Montgomery and unanimously approved.

**ACTION: Certificate of Need: Lorien-Howard, Inc. d/b/a Encore at Turf Valley (Docket No. 15-13-2365) is hereby APPROVED.**

### **ITEM 5.**

#### **ACTION: COMAR 10.25.17: Benchmarks for Preauthorization of Health Care Services – Final Regulations**

Angela Evatt, Chief of Health Information Exchange, presented final regulations “Benchmarks for Preauthorization of Health Care Services.” The regulation adds a fourth benchmark requiring payors and PBMs that require a step therapy or fail-first protocol to establish an electronic process to override the step therapy or fail first protocol for pharmaceutical preauthorization requests. The regulation also includes language to remove expired reporting requirements and changes to the waiver period.

Commissioner Thomas made a motion that the Commission adopt the regulations, which was seconded by Commissioner Carr York and unanimously approved.

**ACTION: COMAR 10.25.17: Benchmarks for Preauthorization of Health Care Services – Final Regulations are hereby ADOPTED.**

**ITEM 6.**

**UPDATE: COMAR 10.25.19: Patient Centered Medical Home – Release for Informal Public Comment**

Melanie Cavaliere, Chief of Innovative Care Delivery, provided an overview of the draft regulations for informal public comment regarding the oversight of value-based care delivery programs, including the patient centered medical home program required by the Maryland Medical Assistance Program for certain Medicaid managed care organizations, and the State Designation of value-based care delivery programs that meet and maintain criteria to be established by the Commission.

**ITEM 7.**

**UPDATE: COMAR 10.25.18: Health Information Technology: Privacy and Security Regulations**

Mrs. Evatt presented on the draft additions and changes to the Health Information Technology – Privacy and Security Regulations that will be released for informal public comment. The draft additions to the regulations pertain to secondary data use and emergency access to data through a health information exchange. The draft changes focus on definitions and reporting by a health information exchange.

**ITEM 8.**

**PRESENTATION: Chesapeake Regional Information System for Our Patients (CRISP)**

David Horrocks, President of CRISP, joined by David Sharp, Director for the Center of Health Information Technology & Innovative Care Delivery, provided an update on leading activities of the State-Designated health information exchange since Mr. Horrocks' last presentation to the Commission more than a year ago. Mr. Horrocks described the major activities in the CRISP portfolio. Particular emphasis was placed on activities that had been spawned by the new hospital payment model. Commissioner Weinstein suggested that CRISP expand the use of information sent to primary care physicians. Commissioner Peralta requested that CRISP link Medicaid data, including critical information on patients' demographics to readmission reports.

**ITEM 9.**

**UPDATE: State Health Plan for Facility and Services: Home Health Agency Services**

Cathy Weiss, Program Manager with the Long Term Care Policy and Planning Division, provided an update on a draft Home Health Agency Chapter of the State Health Plan that is under development. Ms. Weiss discussed the features of the new chapter, including a new approach for determining need. She said that the CON review standards include: financial accessibility; charity care and sliding fee scale, financial feasibility; and impact. Ms. Weiss noted that the goals of the updated Home Health Agency Chapter of the State Health Plan include a focus on consumer choice; a greater emphasis on quality providers; creating opportunities for new home health agency providers and expansion of existing home health agencies; and streamlining the certificate of need review process. Commissioner Moffit asked Ms.

Weiss if she believed it was appropriate to put a limit on the number of applicants that could be approved during a review cycle. Ms. Weiss agreed to examine the question, but added that the staff believed gradual expansion was beneficial to the smooth operation of the market. She noted that the proposed regulations envision gradual expansion that would expand choice, but not inundate consumers with too many alternatives. After this presentation, staff will post the draft chapter for a 30-day Informal Public Comment period.

#### **ITEM 10.**

##### **Overview of Upcoming Initiatives**

Mr. Steffen reported the upcoming matters before the Commission in October will include: Final regulations for Cardiac Surgery & Percutaneous Coronary Intervention Services; Demonstration of the Dashboard developed for the Maryland Insurance Administration; Action on IRBs/Release of MCDB Data; Approval to Release the 2015 PreAuthorization Report; Presentation of the 2015 Health Benefit Plans Quality Report Series; Demonstration of the Expanded MD Health Care Quality Reports website; and an Update on Telehealth Round Three grant applications.

#### **ITEM 11.**

##### **ADJOURNMENT**

There being no further business, the meeting was adjourned at 3:49 p.m. upon motion of Commissioner Schneider, which was seconded by Commissioner Pollak and unanimously approved.